

DEDHAM CLIPPERS....SUMMER 2010

REGISTRATION FORM

SWIMMERS NAME_____ D.O.B. _____ SEX M F

ADDRESS_____ TOWN_____ ZIP_____

DATE OF BIRTH_____ TEL #_____

PARENT/GUARDIANS NAME_____

HAVE YOU EVER BEEN ON THE SUMMER CLIPPERS SWIM TEAM BEFORE? YES ____ NO ____

REGISTRATION FEE...\$40.00 PER SWIMMER WITH A POOL MEMBERSHIP...\$50.00 PER SWIMMER WITHOUT A MEMBERSHIP....FAMILY LIMIT WITH A POOL MEMBERSHIP....\$70.00

PLEASE NOTE...SWIMMERS AGE AS OF JULY 1ST DESIGNATES AGE GROUP....

PRACTICE STARTS TUESDAY, JUNE 1ST THRU JUNE 24TH....PRACTICE MONDAY THRU THURSDAYS 4:00-5:00PM.....JUNE 28TH THRU AUGUST 12TH PRACTICES MONDAY & WEDNESDAYS 4:00-5:00PM...TUESDAYS & THURSDAYS ARE MEET NIGHTS...

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BY MY SIGNATURE, I HEREBY RELEASE THE TOWN OF DEDHAM, PARKS & RECREATION DEPARTMENT FROM ANY LIABILITY REGARDING INJURY WHILE PARTICIPATING IN THIS PROGRAM.

PARENT/GUARDIANS SIGNATURE_____

DATE _____